

12-15-08

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MARY	Approv	PTO/SB/21 (1/7-08) ved for use through 12/31/2008. OMB 0651-0031						
Under the Paperwork Reduction Act of 1995, no persons are require	U.S. Patent and Tradema ed to respond to a collection of informa	ark Office; U.S. DEPARTMENT OF COMMERCE ation unless it displays a valid OMB control number						
·	Application Number	10/698,805-Conf. #2494						
TRANSMITTAL	Filing Date	October 31, 2003						
FORM	First Named Inventor	Peter SZPAK						
	Art Unit	2123						
(to be used for all correspondence after initial filing)	Examiner Name	J. S. Proctor						
Total Number of Pages in This Submission	Attorney Docket Number	MWS-058RCE						
ENCLOSURES (Check all that apply)								
X Fee Transmittal Form Drawi	ng(s)	After Allowance Communication to TC						
Fee Attached Licens	sing-related Papers	Appeal Communication to Board of Appeals and Interferences						
Amendment/Reply Petition	on	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
	on to Convert to a sional Application	Proprietary Information						
	of Attorney, Revocation ge of Correspondence Address	Status Letter						
Extension of Time Request Termi	nal Disclaimer	Other Enclosure(s) (please Identify below):						
Express Abandonment Request Requ	est for Refund	Return Receipt Postcard PTO form SB/08						
x Information Disclosure Statement CD, N	lumber of CD(s)	Copies of Two (2) References						
Certified Copy of Priority Document(s)	Landscape Table on CD							
Reply to Missing Parts/ Incomplete Application	3							
Reply to Missing Parts under 37 CFR 1.52 or 1.53								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name LAHIVE & COCKFIELD, LLP								
Signature 1 1 Cm								
Printed name Kevin J. Canning								

Express Mail Label No. EM 192977720 US Dated: December 12, 2008

Reg. No.

35,470

Date

December 12, 2008

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			respond to a collection of information unless it displays a valid OMB control number Complete if Known							
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Nu	Application Number 10/698,805-Conf. #2494							
FEE TRANSMITTAL				October 31, 2003						
				Peter SZPAK						
For FY 2009		Examiner Name J. S. F		I. S. Proctor	S. Proctor					
Applicant claims small entity status. See 37 CFR 1.27		Art Unit	Unit 2123							
TOTAL AMOUNT OF P	TOTAL AMOUNT OF PAYMENT (\$) 180.00		Attorney Docke	tet No. MWS-058RCE						
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify): x Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
			<i>,</i> \vdash `		·	except for th	e ming lee			
	any additional fee(nder 37 CFR 1.16	s) or underpayments o and 1.17	of x Credi	t any overpa	yments					
FEE CALCULATION										
1. BASIC FILING, SE	ARCH, AND EXA	MINATION FEES								
	FILIN		ARCH FEES		ATION FEES	3				
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	(\$) bic			
Utility	330	165 540		220	110	1 663 1	aiu (#)			
Design	220	110 100		140	. 70					
Plant	220	110 330		170	85					
Reissue	330	165 540		650	325	-				
Provisional	220	110 0		030	0					
2. EXCESS CLAIM F		110 0	U	U	· ·		Small Entity			
Fee Description	LLS					Fee (\$)	Fee (\$)			
Each claim over 20 (including Reissues)				52	26			
Each independent cla	im over 3 (includi	ng Reissues)				220	110			
Multiple dependent c	laims					390	195			
Total Claims	Extra Claims	Fee (\$) F	Fee Paid (\$)		Multiple Dependent Claims					
	P=x			<u>Fee</u>) (\$)	Fee Paid (\$)	1			
HP = highest number of t	total claims paid for, if g						_			
Indep. Claims	Extra Claims		ee Paid (\$)							
- or HF										
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
<u>Total Sheets</u>	Extra Sheets		additional 50 or fra	ction thereof	Fee (\$)	Fee P	aid (\$)			
100 = /50 = (round up to a whole number) x =										
4. OTHER FEE(S) Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00										
SUBMITTED BY	1 . (
Signature	Zen 1	<u> </u>	Registration No. (Attorney/Agent) 35,470 Telephone (617) 994-0732							
Name (Print/Type) Key	rin J. Canning	1	1 (_	Date December 12, 2008					
1,7,7,7,100	:				1		, 2000			

Docket No.: MWS-058RCE (PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Peter Szpak et al.

Application No.: 10/698,805

Filed: October 31, 2003

For:

SIMPLIFIED DATA SIGNAL SUPPORT

FOR DIAGRAMMING ENVIRONMENT

LANGUAGES

Examiner: J. S. Proctor

Art Unit: 2123

Confirmation No.: 2494

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (SIDS)

Dear Madam:

In accordance with 37 CFR 1.97, Applicants hereby make of record the following additional documents. A PTO Form SB/08 and a full copy of each of the documents required under 37 CFR 1.98(a)(2) accompany this statement.

This statement is not to be interpreted as a representation that the cited documents are material, that an exhaustive search has been conducted, or that no other relevant information exists. Nor shall the citation of any document herein be construed *per se* as a representation that such document is prior art. Moreover, Applicants understand the Examiner will make an independent evaluation of the cited documents.

This Supplemental Information Disclosure Statement is filed after the mailing date of a Notice of Allowance, but before payment of the Issue Fee (37 CFR 1.97(d)). Applicants hereby petition that the Supplemental Information Disclosure Statement be considered.

12/15/2008 SSESHE1 00000004 120080 10698805

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180.00 DA

Application No.: 10/698,805 Docket No.: MWS-058RCE

I hereby certify, pursuant to 37 CFR 1.97(e)(2), that no item of information contained in this Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application and, to my knowledge after making reasonable inquiry, no item of information contained in this Information Disclosure Statement was known to any individual designated in 37 CFR 1.56(c) more than three months prior to the filing of this Information Disclosure Statement.

Please charge our Deposit Account No. 12-0080 in the amount of \$180.00 covering the fee set forth in 37 CFR 1.17(p). The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 12-0080, under Order No. MWS-058RCE.

By

Dated: December 12, 2008

KJC/mch

Respectfully submitted,

Kevin J. Canning

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